

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	O.	DATE
FEE DETERMINATION	SM		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	cf	6945/10221	5 7-27-91 8-6-98/10-20-98

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6-22-90
2	✓	✓	12-21-90
3	✓	✓	7-28-91
4	✓	✓	11-15-91
5	✓	✓	2-7-92
6	✓	✓	4-22-95
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
12	✓	✓	✓
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14	✓	✓	✓
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49	✓	✓	✓
50	✓	✓	✓

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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